#### FORM D



114238

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB	AF	PR	O١	/A

OMB Number: 3235-0076 Expires: May 31, 2005

Estimated average burden hours

per response..... 16.00

SEC USE ONLY					
Prefix Serial					
DATE RECEIVED					

11-10-0-					
Name of Offering (☐ check if this is an amendment and name has Common Stock of Webtronics, Inc.	chang	ed, and i	ndicate (	change.)	RECEIVED TO
Filing Under (Check box(es) that apply): □Rule 504 □Rule 505	ØRul	le 506 🗆	Section	4(6) □UI	LOE < MAY 1 5 2003 >>
Type of Filing: ☑ New Filing □ Amendment					MANAGE II @ 5003
A. BASI	CIDE	NTIFIC	ATION	DATA	155 100
1. Enter the information requested about the issuer					
Name of Issuer ( check if this is an amendment and name has chebtronics, Inc.	anged	, and ind	icate cha	inge.)	
Address of Executive Offices (Number and Street, City, State, Zico Callisto Pharmaceuticals, Inc.	Telephone Number (Including Area Code) 212-672-9190				
420 Lexington Avenue, Suite 601, New York, NY 10170					
Address of Principal Business Operations (Number and Street, Ci (if different from Executive Offices)	Telephone Number (Including Area Code)				
Brief Description of Business: biotech					PDOCECOER
Type of Business Organization					I WOOESSED
☐ corporation ☐ limited partnership already formed ☐ business trust ☐ limited partnership, to be formed		□ other	(please	specify):	MAY 16 2003
Actual or Estimated Date of Incorporation or Organization:	М	onth	Y	ear	THOMSON  ☑ Actual □ Estimated FINANCIAL
	0	2	0	1	
Jurisdiction of Incorporation or Organization: (Enter two-letter CN for Canada; I					
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance of When To File: A notice must be filed no later than 15 days after the first Commission (SEC) on the earlier of the date it is received by the SEC	sale of	securities	in the of	fering. A	notice is deemed filed with the U.S. Securities and Exchange

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

date it was mailed by United States registered or certified mail to that address.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A.	A. BASIC IDENTIFICATION DATA
2.	Enter the information requested for the following:
•	Each promoter of the issuer, if the issuer has been organized within the past five years;
•	Each beneficial owner having power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the
	issuer;
•	Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
•	Each general and managing partner of partnership issuers.
Ch	eck Box(es) that Apply: 🗆 Promoter 🗹 Beneficial Owner 🗆 Executive Officer 🗆 Director 🗀 General and/or Managing Partner
	ll Name (Last name first, if individual) Briel M. Cerrone
	siness or Residence Address (Number and Street, City, State, Zip Code) Webtronics, Inc., 420 Lexington Avenue, Suite 601, New York, NY 10170
Ch	eck Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner
Do	ll Name (Last name first, if individual) mald G. Drapkin
	siness or Residence Address (Number and Street, City, State, Zip Code) Webtronics, Inc., 420 Lexington Avenue, Suite 601, New York, NY 10170
Ch	eck Box(es) that Apply: □ Promoter □ Beneficial Owner ☑ Executive Officer ☑ Director □General and/or Managing Partner
Ch	ll Name (Last name first, if individual)  Iristoph Bruening
	siness or Residence Address (Number and Street, City, State, Zip Code)  Crooked Stick Drive, Newport Beach, CA 92660
Ch	eck Box(es) that Apply:   Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Fu	Il Name (Last name first, if individual)
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)
Ch	eck Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner
Fu	ll Name (Last name first, if individual)
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)
Ch	neck Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner
Fu	Il Name (Last name first, if individual)
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)
ł	neck Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner
Fu	Il Name (Last name first, if individual)
Ві	isiness or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INFO	RMATI	ON ABOI	U <b>T OFFE</b>	RING				
			·····		······································				·····		<u> </u>	Yes	No
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.									<b>☑</b>				
2. What is the minimum investment that will be accepted from any individual?								N/A Yes	s No				
3. Does the	offering	permit joi	nt ownersl	nip of a sin	ngle unit?		••••••			•••••		M	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Not applicable.													
Full Name (	Last name	e first, if i	ndividual)										
Desir	Desides	- A J J	<b>O</b> 11	1.04	Cir. St	+ 7: C	4-0						
Business or				and Street	t, City, Sta	ite, Zip Co	ode)				- 10 10 10 10 10 10 10 10		
Name of As	sociated I	Broker or	Dealer:										
States in Wi					nds to Sol	icit Purch							C. A.11 C4-4
(Check "All	[AK]	r check in [AZ]	aividual S [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[ FL]	[GA]	[ HI]	[ ID ]	□ All States
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[DC] [MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[ RI]	[SC]	[SD]	[TN]	[TX]	[TU]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (	Full Name (Last name first, if individual)												
Business or	Residenc	e Address	(Number	and Stree	t, City, Sta	ite, Zip Co	ode)				<i></i>		
Name of As	ssociated I	Broker or	Dealer		-			_					
States in WI													
													All States
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[ FL] [MI]	[GA] [MN]	[ HI] [MS]	[ ID ] [MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in W							asers						All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ ID ]	
[ IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[ NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
	J	r 1	£ 2 )	J	r 1	f1	£ J	F 1		r1		r1	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already

1.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	-0-	-0-
	Equity	25,539,336	
	☑ Common ☐ Preferred (convertible)		
	Convertible Securities (including warrants)	-0-	-0-
	Partnership Interests	-0-	-0-
	Other (Specify)	-0-	-0-
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		\$10.00 (100 pg. 1)
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	142	25,539,336
	Non-accredited Investors.	-0-	-0-
	Total (for filings under Rule 504 only)	N/A	N/A
	Answer also in Appendix, Column 4, if filing under ULOE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question I.	Type of Security	Dollar Amount Sold
	Type of offering		
	Rule 505	N/A	N/A
	Regulation A	N/A	N/A
	Rule 504	N/A	N/A
	Total	N/A	N/A
in ma	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities this offering. Exclude amounts relating solely to organization expenses of the issuer. The information ay be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an timate and check the box to the left of the estimate.		
	Transfer Agent's Fees		5,000
	Printing and Engraving Costs		-0-
	Legal Fees		15,000
	Accounting Fees	$\square$	10,000
	Engineering Fees		-0-
	Sales Commissions (specify finders' fees separately)		-0-
	Other Expenses (identify): Blue Sky filing fees		-0-
	Total	$\square$	25,000

C. OFFERING PRICE, NUME	BER OF INVESTORS, EXPENSES AND US	E OF PR	OCEEDS		
b. Enter the difference between the aggregate offering pritotal expenses furnished in response to Part C - Question proceeds to the issuer."	4.a. This difference is the "adjusted gross				
5. Indicate below the amount of the adjusted gross proceed of the purposes shown. If the amount for any purpose is not the left of the estimate. The total of the payments listed murforth in response to Part C - Question 4.b above.	ot known, furnish an estimate and check the	oox to			
			Payments to Officers, Directors & Affiliates		Payments To Others
Salaries and fees					
Purchase of real estate		۔ ت			
Purchase, rental or leasing and installation of mac	hinery and equipment			ם <i>-</i>	
Construction or leasing of plant buildings and fac	ilities		<del></del>	<u> </u>	
Acquisition of other businesses (including the va	ue of securities involved in this offering that	-			
may be used in exchange for the assets or socuriti					
Repayment of indebtedness (contingent on suffic					
Working capital				□ <sup>-</sup>	
Other (specify):					
Column Totals					
Total Payments Listed (column totals added	)	_			
	D. FEDERAL SIGNATURE				
The issuer has duly caused this notice to be signed by the undersig undertaking by the issuer to furnish to the U.S. Securities and Exch accredited investor pursuant to paragraph (b)(2) of Rule 502.	•		-	-	
Webtronics, Inc.	Signature A L	Date May (†			
	itle of Signer (Prink or Type): ) President				